

FILED OCT 3 2022 13:47 WDC/ORE

Pro Se 1 (Rev. 12/16) Complaint for a Civil Case

UNITED STATES DISTRICT COURT

for the

District of OregonEugene Division

Michael Merritt Shyrer

Kaylee Love Shyrer

Case No. 6:22-CV-01485-MK
(to be filled in by the Clerk's Office)

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint.
If the names of all the plaintiffs cannot fit in the space above,
please write "see attached" in the space and attach an additional
page with the full list of names.)

-v-

Oregon Department of Human Services
Child Welfare
Ashlynn Banks
Lacey AlverniaJury Trial: (check one) Yes No

Defendant(s)

(Write the full name of each defendant who is being sued. If the
names of all the defendants cannot fit in the space above, please
write "see attached" in the space and attach an additional page
with the full list of names.)

COMPLAINT FOR A CIVIL CASE

I. The Parties to This Complaint

A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	<u>Michael M. Shyrer / KayLee L. Shyrer</u>
Street Address	<u>6419 Jade Street</u>
City and County	<u>Sutherlin Douglas</u>
State and Zip Code	<u>Oregon 97479</u>
Telephone Number	<u>541-530-8291</u>
E-mail Address	<u>MichaelandLiddieah@yahoo.com</u>

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

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Defendant No. 1

Name	<u>Oregon Department of Human Services Childwelfare</u>
Job or Title (<i>if known</i>)	
Street Address	<u>738 W Harvard Avenue</u>
City and County	<u>Roseburg Douglas</u>
State and Zip Code	<u>Oregon 97471</u>
Telephone Number	<u>541-440-3301</u>
E-mail Address (<i>if known</i>)	

Defendant No. 2

Name	<u>Ashlynn Banks</u>
Job or Title (<i>if known</i>)	<u>Child Welfare Case Worker</u>
Street Address	
City and County	
State and Zip Code	
Telephone Number	
E-mail Address (<i>if known</i>)	

Defendant No. 3

Name	<u>Lacey Alvernaz</u>
Job or Title (<i>if known</i>)	<u>Child Welfare Case Worker</u>
Street Address	
City and County	
State and Zip Code	
Telephone Number	
E-mail Address (<i>if known</i>)	

Defendant No. 4

Name	
Job or Title (<i>if known</i>)	
Street Address	
City and County	
State and Zip Code	
Telephone Number	
E-mail Address (<i>if known</i>)	

II. Basis for Jurisdiction

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation and the amount at stake is more than \$75,000 is a diversity of citizenship case. In a diversity of citizenship case, no defendant may be a citizen of the same State as any plaintiff.

What is the basis for federal court jurisdiction? (*check all that apply*)

- Federal question Diversity of citizenship

Fill out the paragraphs in this section that apply to this case.

A. If the Basis for Jurisdiction Is a Federal Question

List the specific federal statutes, federal treaties, and/or provisions of the United States Constitution that are at issue in this case.

28:2672pi, 42:1983CV, 42:1986

B. If the Basis for Jurisdiction Is Diversity of Citizenship**1. The Plaintiff(s)****a. If the plaintiff is an individual**

The plaintiff, *(name)* _____, is a citizen of the
State of *(name)* _____.

b. If the plaintiff is a corporation

The plaintiff, *(name)* _____, is incorporated
under the laws of the State of *(name)* _____
and has its principal place of business in the State of *(name)* _____.

(If more than one plaintiff is named in the complaint, attach an additional page providing the same information for each additional plaintiff.)

2. The Defendant(s)**a. If the defendant is an individual**

The defendant, *(name)* _____, is a citizen of
the State of *(name)* _____. Or is a citizen of
(foreign nation) _____.

b. If the defendant is a corporation

The defendant, (name) _____, is incorporated under
 the laws of the State of (name) _____, and has its
 principal place of business in the State of (name) _____.
 Or is incorporated under the laws of (foreign nation) _____,
 and has its principal place of business in (name) _____.

(If more than one defendant is named in the complaint, attach an additional page providing the same information for each additional defendant.)

3. The Amount in Controversy

The amount in controversy—the amount the plaintiff claims the defendant owes or the amount at stake—is more than \$75,000, not counting interest and costs of court, because (*explain*):

III. Statement of Claim

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

DHS removed my three year old daughter on Feb. 23 2021. DHS employees Ashlynn Banks and Lacey Alvernaz came to my home with Police Assistance and removed my daughter Kaylee from our home where she had not been subjected to any harm or injured in any way. This began an 11 month process of completely disrupting my relationship with my daughter and her relationship to me depriving me of my Liberty Interest's and her being deprived of her ongoing attachment and need to be with her Father, which causes us severe emotional harm. We have suffered through DHS dishonesty, misrepresentation and abuse of power. My Family was forced apart for 11 months after my wife miscarried at 29 weeks and they needed my support. This causes me great anguish. DHS allegations were not legitimate.

IV. Relief

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages.

DHS-CWS has a duty and responsibility that connect to their conducting a Fair competent and honest investigation and them acting with the authority the court gives them to meet the needs of the children, in this case they did not follow the law. I am seeking the cost I incurred during the 11 months I was forced out of home and incurred at hotels and restaurants also Attorney Fees and Punitive damages will be calculated in. I have actual damages of 135,000.00. I seek to recover actual damages as well as punitive damages of the same amount on behalf of me and my Daughter totaling 270,000.00 dollars.

V. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: 9/29/22

Signature of Plaintiff



Printed Name of Plaintiff

Michael Shyrer

B. For Attorneys

Date of signing:

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Street Address

State and Zip Code

Telephone Number

E-mail Address
